

**STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
INSTRUCTIONS FOR
COMPLETING FORMS DHMH 436A-G
BUDGET MODIFICATION REQUEST
HUMAN SERVICES PROGRAM**

General Instructions

A budget modification is a revised budget, which restates the original budget and incorporates line item changes desired by either the vendor or the program administration to achieve a new approved budget. A budget modification does not affect the total amount of other funding sources.

DHMH 436A - Budget Modification Request (2 Pages)

- Section I -** Vendor information
- Section II -** The most current approved budget information (From either an approved Human Service Contract Proposal, DHMH 432 or a prior approved Budget prior approved Budget Modification Request)
- Section III -** The budget you would like to have approved. The DHMH funding total cannot be different from the most current approved budget.

DHMH 436B - Schedule of Estimated Performance Measures

This schedule must be completed if the current estimate of performance measures is different from the estimate included in the last approved budget.

DHMH 436C - Schedule of Salary Costs

This schedule must be completed if the DHMH salary costs on the DHMH 436A are different from the DHMH salary costs on the last approved budget. This form must contain the total DHMH salaries including the modification. The total program budget may be required by the program administrations.

DHMH 436D - Schedule of Consultant Costs

This schedule must be completed if the DHMH consultant costs on the DHMH 436A are different from the DHMH consultant costs on the last approved budget. This form must contain the total DHMH consultant costs including the modification. The total program budget may be required by the program administrations.

DHMH 436E - Schedule of Equipment Costs

This schedule must be completed if the DHMH equipment costs on the DHMH 436A are different from the DHMH equipment on the last approved budget. This form must contain the total DHMH equipment including the modification. The total program budget may be required by the program administrations.

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DHMH 436F - Schedule of Purchase of Service

This schedule must be completed if the DHMH purchase of service costs on the DHMH 436A is different from the DHMH purchase of service costs on the last approved budget. This form must contain the total DHMH purchase of service costs including the modification. Information on performance measures should be supplied. The total program budget maybe required by the program administration.

DHMH 436G - Anticipated Sources of Funding Page

This schedule must be completed if the anticipated funding has changed since the last approved budget.

When must a budget modification be submitted?

A budget modification must be submitted whenever the following controlled line items change:

1. Total of salaries, consultants, special payments by 4% for Local Health Departments, 3% for other vendors.
2. Equipment by \$1,000.
3. Purchase of Service by the greater of 3% or \$2,000 for vendors other than Local Health Departments.
4. Renovation/Remodeling by 10% for vendors other than Local Health Departments.
5. Estimated third party income by 5%.

The following conditions would also require a budget modification:

1. The program administration has specified in the funding agreement, a condition requiring submission of a budget modification, and that condition occurs.
2. Expenditures have been, or will be, made in an unbudgeted line item.

DHMH Audit

If one of the above conditions existed and there is not an approved budget modification, the DHMH auditors will disallow the expenditure at the time of audit.

Example:

Equipment budget	\$2,000
Equipment expenditures	\$3,500
No budget modification	
Audit disallowance	\$ 500